

26.2004 2:15PM

ATMI LEGAL FAX 203-797-2544

NO. 1135 P. 3/4

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly make-up with any corrections or use Block 1)

25559

7590

05/26/2004

ATMI, INC.
7 COMMERCE DRIVE
DANBURY, CT 06810

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Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Danielle Manone (Depositor's name)
Danielle Manone (Signature)
August 26, 2004 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/935,805	08/23/2001	Ying Ma	520	9597

TITLE OF INVENTION: ABRASIVE FREE FORMULATIONS FOR CHEMICAL MECHANICAL POLISHING OF COPPER AND ASSOCIATED MATERIALS AND METHOD OF USING SAME

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	08/26/2004
EXAMINER	ART UNIT	CLASS-SUBCLASS			
GOUDREAU, GEORGE A	1763	216-013000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Margaret Chappuis

2 Steven J. Hultquist

3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Advanced Technology Materials, Inc.

Danbury, CT

Please check the appropriate assignee category or categories (will not be printed on the patent):

☐ individual ☒ corporation or other private group entity ☐ government

4a. Payment of fee(s) are enclosed:

☒ Issue Fee☒ Publication Fee☐ Advance Order - # of Copies

4b. Payment of Fee(s):

☐ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 500860 (enclose an extra copy of this form).

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature)

(Date)

William Ryan 8/26/04

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08/27/2004 AWONDAF2 00000049 500860 09935805

01 FC:1501

1330.00 DA

02 FC:1504

300.00 DA

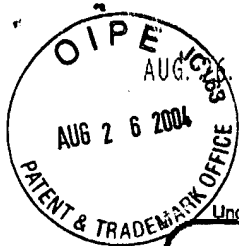
TRANSMIT THIS FORM WITH FEE(S)

PTOL-85 (Rev. 11/03) Approved for use through 04/30/2004.

OMB 0651-0033

U.S. Patent and Trademark Office

PAGE 3/4 * RCVD AT 8/26/2004 2:13:06 PM [Eastern Daylight Time] * SVR:USPTO-EFXXF-2/0 * DNIS:7464000 * CSID:203 797 2544 * DURATION (mm-ss):01:48



AUG 26 2004 2:15PM

ATMI LEGAL FAX 203-797-2544

NO. 1135 P. 4/4

Approved for use through 07/31/2006. OMB 0851-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
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FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$1630.00)

Complete if Known

Application Number	09/935,805
Filing Date	August 23, 2001
First Named Inventor	Ying Ma
Examiner Name	Goudreau, George A.
Art Unit	1783
Attorney Docket No.	ATMI - 520

METHOD OF PAYMENT (check all that apply)☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None☒ Deposit Account:Deposit
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Advanced Technology Mater

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments☒ Charge any additional fee(s) or any underpayment of fee(s)☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1001	770	2001	385	Utility filing fee	
1002	340	2002	170	Design filing fee	
1003	530	2003	265	Plant filing fee	
1004	770	2004	385	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	
SUBTOTAL (1)					(\$)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims		Extra Claims		Fee from below		Fee Paid	
Independent	Multiple Dependent	-20** =	-3** =	X	=	X	=

Large Entity		Small Entity		Fee Description
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
1202	18	2202	9	Claims in excess of 20
1201	86	2201	43	Independent claims in excess of 3
1203	290	2203	145	Multiple dependent claim, if not paid
1204	88	2204	43	** Reissue independent claims over original patent
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2)

(\$)

**or number previously paid, if greater. For Reissues, see above

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for ex parte reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	110	2251	65	Extension for reply within first month	
1252	420	2252	210	Extension for reply within second month	
1253	950	2253	475	Extension for reply within third month	
1254	1,480	2254	740	Extension for reply within fourth month	
1255	2,010	2255	1,005	Extension for reply within fifth month	
1401	330	2401	165	Notice of Appeal	
1402	330	2402	165	Filing a brief in support of an appeal	
1403	290	2403	145	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1,330	2453	665	Petition to revive - unintentional	
1501	1,330	2501	665	Utility issue fee (or reissue)	1330
1502	480	2502	240	Design issue fee	
1503	640	2503	320	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1808	180	1808	180	Submission of Information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	770	2809	385	Filing a submission after final rejection (37 CFR 1.128(a))	
1810	770	2810	385	For each additional invention to be examined (37 CFR 1.128(b))	
1801	770	2801	385	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	

Other fee (specify)

300

*Reduced by Basic Filing Fee Paid

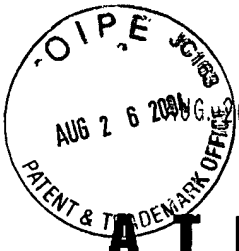
SUBTOTAL (3) (\$1630.00)

SUBMITTED BY

Name (Print/Type)	William F. Ryann	Registration No. (Attorney/Agent)	44,313	Telephone	203-794-1100
Signature		Date	August 28, 2004		

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6. 2004 2:14PM

ATMI LEGAL FAX 203-797-2544

NO. 1135 P. 1/4

7 Commerce Drive, Danbury, CT 06810 203.794.1100 203.797.2544
web.atmi.com info@atmi.com

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facsimile transmittance

To: Mail Stop Issue Fee Fax: 703-746-4000
From: William F. Ryann Date: August 26, 2004
E-mail: wryann@atmi.com Pages: 4 pages (including cover sheet)
Re: ATMI 520 cc: Steven J. Hultquist, Esq.
U.S. Application No. 09/935,805 IPTL

FACSIMILE TRANSMISSION CERTIFICATE

It hereby is certified by the person identified below that this paper is being facsimile transmitted by such person to the Commissioner of Patents and Trademarks on the date specified, to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, and Transmitted by Facsimile under the provisions of 37 CFR 1.6(d).


Danielle Manone

August 26, 2004
Date of Transmission

703-746-4000
Facsimile Number

OFFICIAL COMMUNICATION

Payment of Issue Fee in U.S. Application No. 09/935,805

Please find the following documents enclosed:

Transmittal Form (1 pg)
Fee Transmittal Form (1 pg)
Issue Fee Transmittal Form (1 pg)
Facsimile Transmission Sheet (1 pg)

Please call 203-794-1100 ext. 4372 if there are any problems with this transmittal.

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PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/935,805
	Filing Date	August 23, 2001
	First Named Inventor	Ying Ma
	Group Art Unit	1763
	Examiner Name	Goudreau, George A.
Total Number of Pages In This Submission		Attorney Docket Number
		ATMI - 520

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Issue Fee Payment
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	William F. Ryann, Reg. No. 44,313
Signature	
Date	August 26, 2004

CERTIFICATE OF FACSIMILE TRANSMISSION 703-746-4000			
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Type or printed name	Danielle Manone		
Signature		Date	August 26, 2004

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